

New York City
Human Resources
Administration's

Office of Citywide
Health Insurance
Access (OCHIA)



Presentation for
Community Educators

Health Insurance Options Available in NYC



Human Resources Administration

Office of Citywide Health Insurance Access

Overview

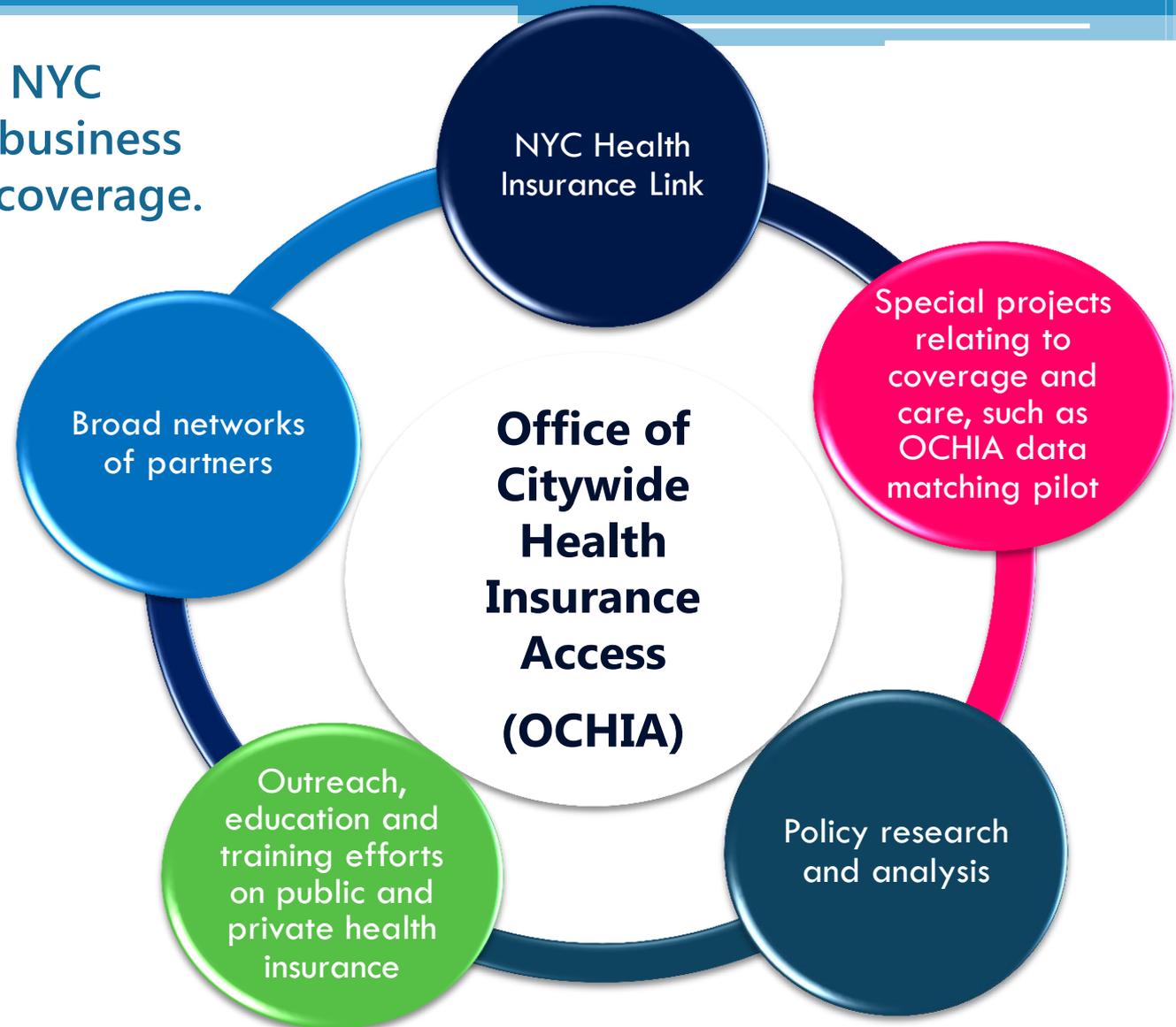
- ❑ Key Health Care Reform Facts
- ❑ NY State of Health
- ❑ Pathways to Health Insurance
- ❑ NY State of Health Insurance Programs
- ❑ Financial Assistance from the Marketplace
- ❑ Penalty and Exemptions
- ❑ Key Marketplace Dates
- ❑ Medicaid and other Programs for People 65 years and older, living with a disability or visual impairment



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Working to connect NYC residents and small business owners to care and coverage.



Why do New Yorkers need health insurance coverage?

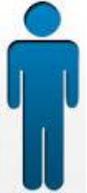
- Health insurance helps pay for medical bills you may have when going for a regular checkup or when you must go to the hospital.
- If something happens to you, you can get a large medical bill. You do not plan to get sick or hurt, but it can happen.



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Key Health Care Reform Facts



Individuals

Will face a penalty in 2018 if uninsured in 2017***



Small Businesses (<50 Full Time Employees)

Are not required to offer employees health insurance



Large Businesses (50-99 Full Time Employees)

Will pay a fine in 2018*** for Full Time Employees (FTEs) not offered adequate* and affordable** coverage in 2017



Large Businesses (100+ Full Time Employees)

Will pay a fine in 2018*** for FTEs not offered adequate* and affordable** coverage in 2017

The Affordable Care Act assures that new health plans offer **10 Essential Benefits** to individuals and small business employees

Preventive and Wellness Services & Chronic Disease Management

Outpatient Services

Mental Health & Substance Abuse Services

Emergency Services

Maternity & Newborn Care

Prescription Drugs

Hospitalization

Physical & Occupational Therapy Services and Supports

Laboratory & Imaging Services

Pediatric services including oral and vision care

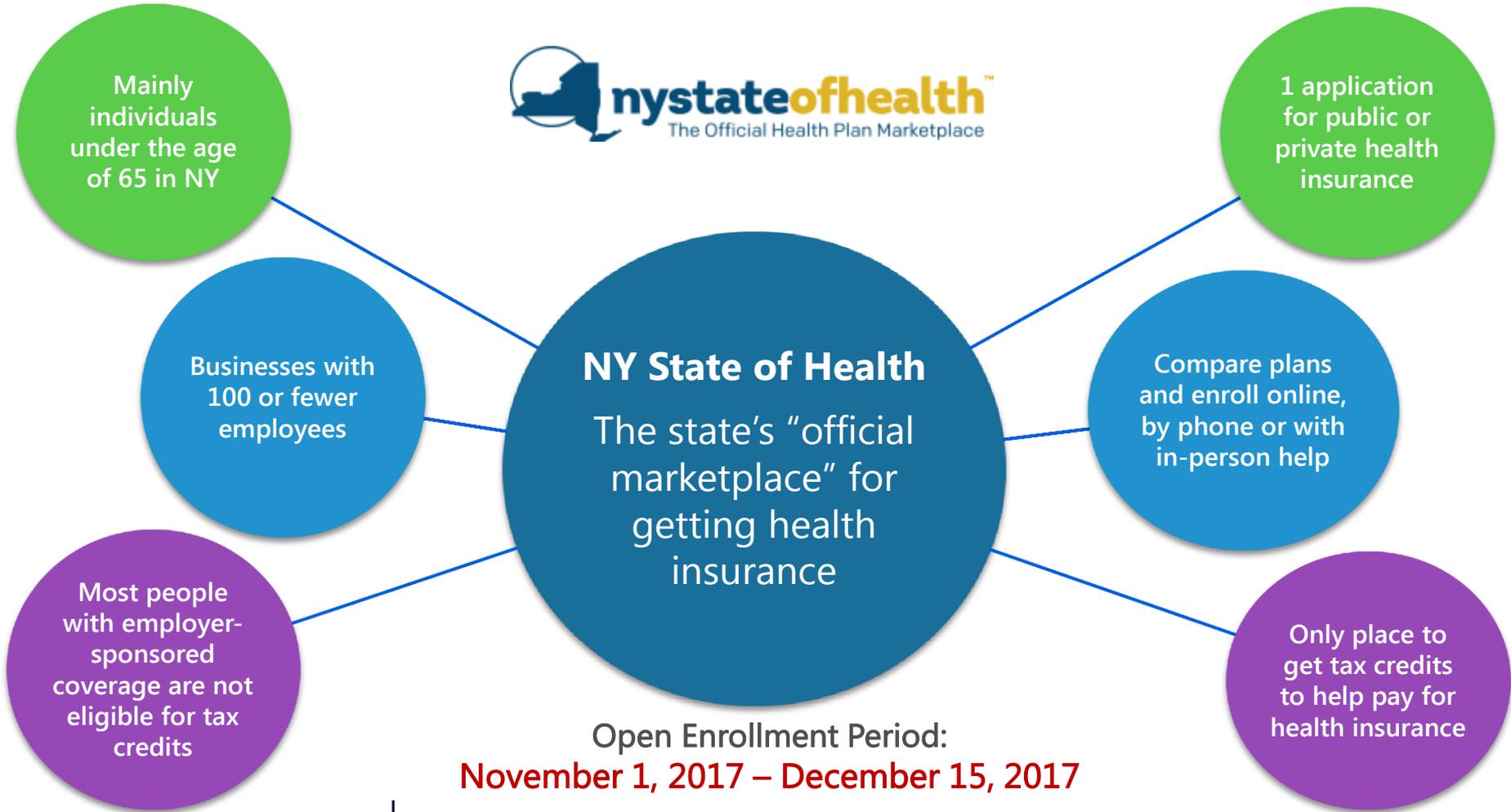


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Who it serves

What it offers



Mainly individuals under the age of 65 in NY

1 application for public or private health insurance

Businesses with 100 or fewer employees

Compare plans and enroll online, by phone or with in-person help

Most people with employer-sponsored coverage are not eligible for tax credits

Only place to get tax credits to help pay for health insurance

Open Enrollment Period:

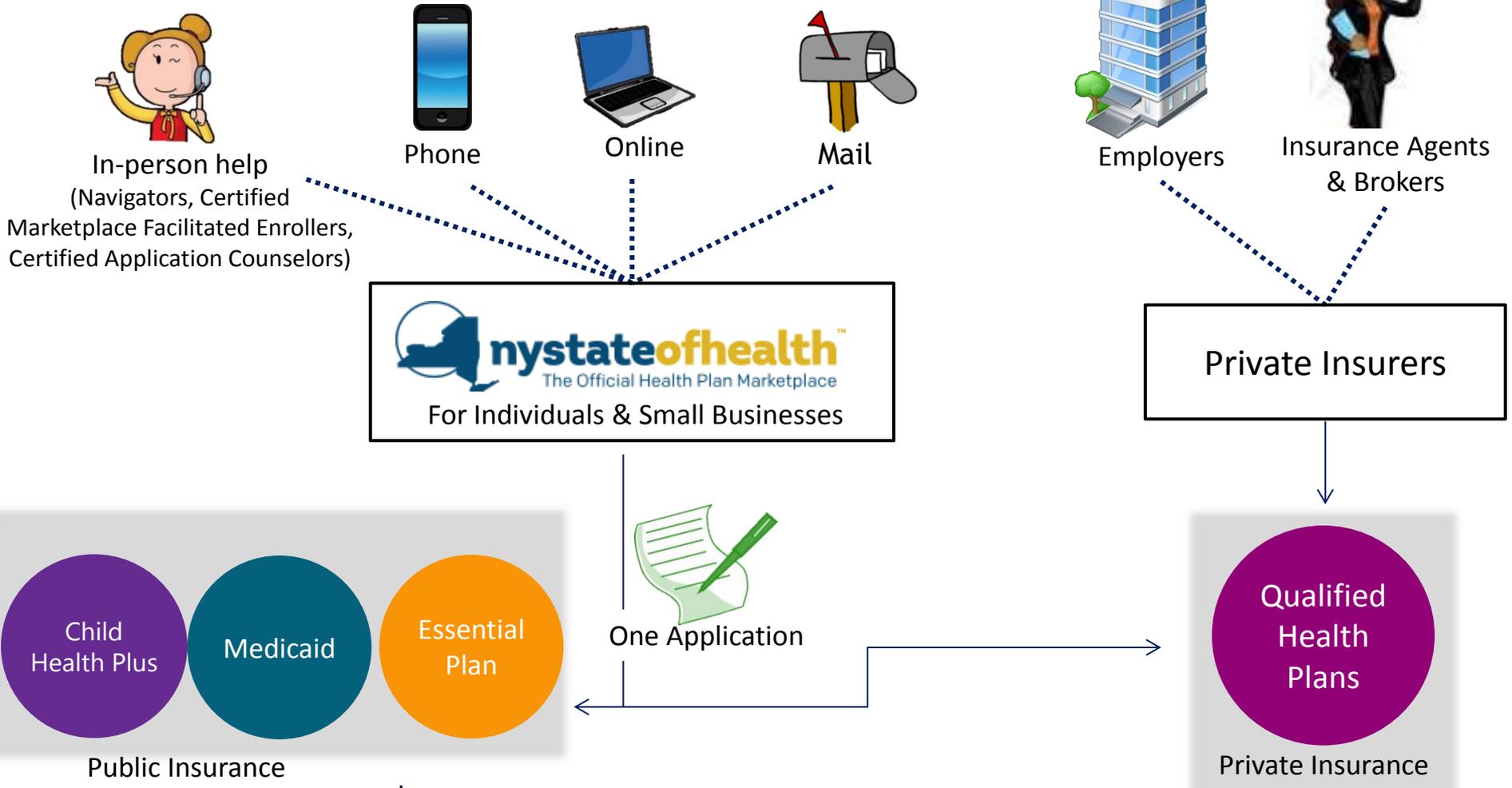
November 1, 2017 – December 15, 2017



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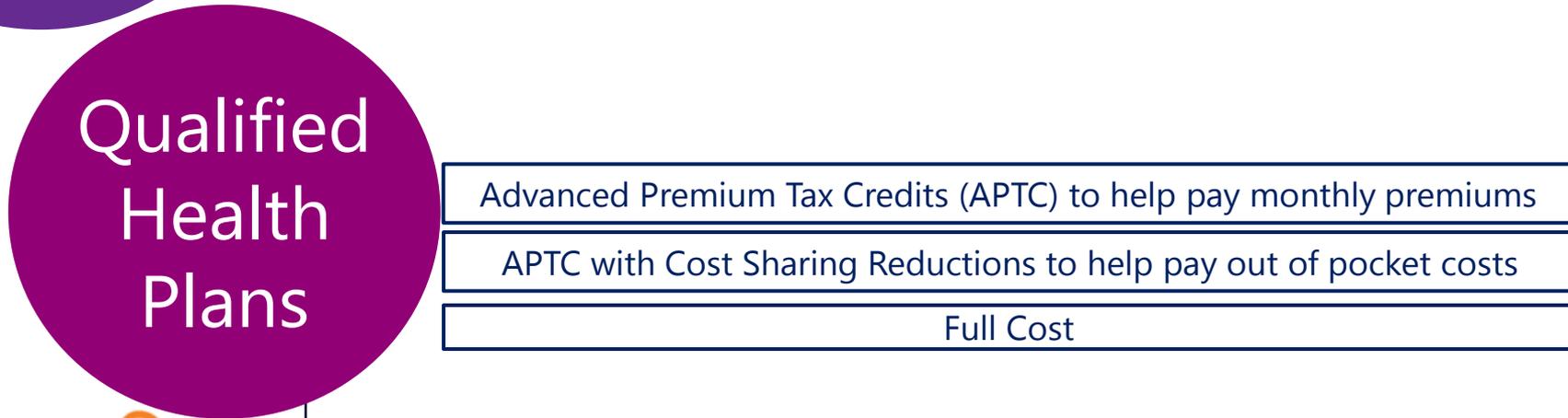
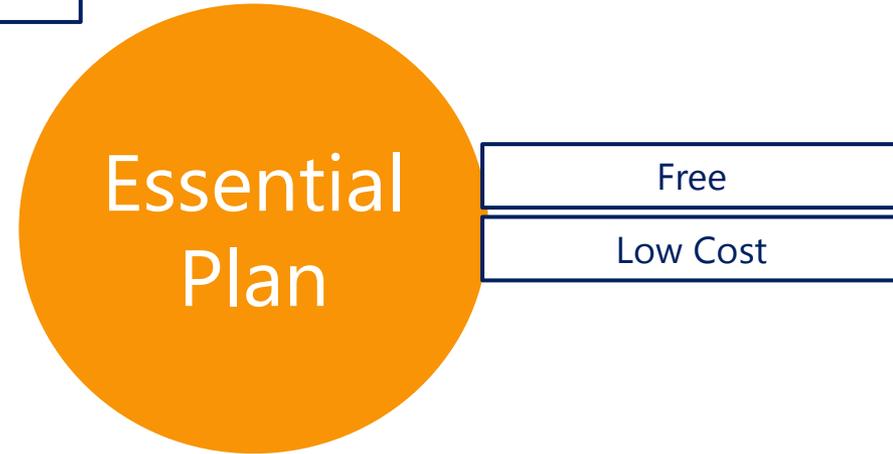
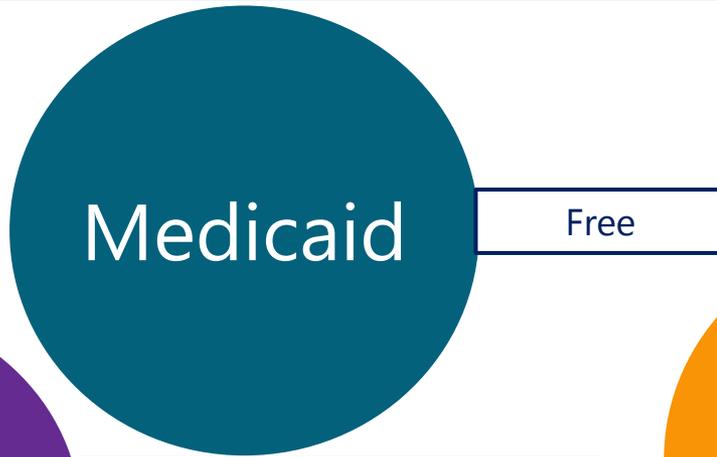
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Pathways to Health Insurance



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NY State of Health Insurance Programs



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The Affordable Care Act aims to make health insurance accessible to more individuals* by reducing the cost of insurance in new Marketplaces

Who is eligible for:



Medicaid?

- Single adults earning up to \$16,643/yr
- Couples earning up to \$22,411/yr
- Pregnant woman (carrying one child) earning up to \$36,216
- Adults in a Family of 4 earning up to \$33,948/yr

Essential Plan?

- Single adults earning up to \$23,760/yr
- Couples earning up to \$32,040/yr
- Adults in family of 4 earning up to \$48,600/yr



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*Non-elderly individual and their families, including sole proprietors;
Income data source: 2017 federal poverty levels*

The Affordable Care Act aims to make health insurance accessible to more individuals* by reducing the cost of insurance in new Marketplaces

Qualified Health Plans

Who is eligible for:

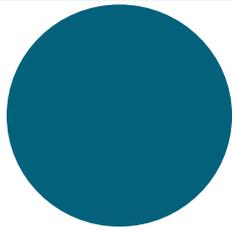


Tax credits
and
cost-sharing
assistance?

- Single adults earning up to \$29,700/yr
- Couples earning up to \$40,050/yr
- Adults in a family of 4 earning up to \$60,750/yr

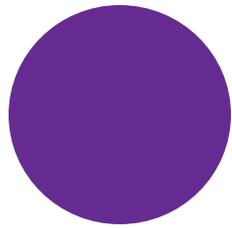
Tax Credits
to help
pay for
premiums?

- Single Adults earning up to \$47,520/yr
- Couples earning up to \$64,080/yr
- Adults in a family of 4 earning up to \$97,200/yr



Medicaid

- Provides free health insurance coverage to New Yorkers who qualify
- Covers the 10 essential benefits required by the Affordable Care Act
- Eligibility criteria includes income up to 138% of the Federal Poverty Level for people under 65 years old
- Some recipients may be required to make co-payments
- Medicaid coverage can be granted retroactively for up to 3 months prior to the month of the application, if the individual would have been eligible during the retroactive period
- Apply through the New York State of Health Marketplace to determine eligibility for people under 65 years old; individuals 65 and over, living with a disability or visual impairment apply through HRA



Child Health Plus

All children are eligible for Child Health Plus regardless of immigration status

Covers the 10 essential benefits required by the Affordable Care Act

Children must be under the age of 19 and be residents of New York State

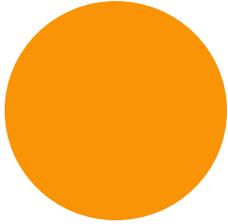
Depending on household income, Child Health Plus may be free or require a monthly premium

There are no co-payments for services



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Essential Plan

Has more affordable monthly premiums than subsidized private health insurance on the Marketplace: \$0 - \$20

There is no deductible for any of the Essential Plans

Provides the same 10 essential health benefits as qualified health plans

Eligibility: Lower income adults (19 – 64 years old) who are **not** eligible for Medicaid, Child Health Plus, or affordable minimal essential coverage (e.g., employer insurance, Medicare)



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Essential Plan Costs and Benefits

Category	Income	Cost Sharing	Premium	Benefits	Dental and Vision
1	150% - 200% (\$17,820 - \$23,760)	Low	\$20	QHP	Optional (\$26 - \$32)
2	138% - 150% (\$16,643 - \$17,820)	Almost \$0	\$0	QHP	Optional (\$26 - \$32)
3*	100% - 138% (\$12,060 - \$16,643)	Almost \$0	\$0	QHP + Extra	Included
4*	0% - 100% (\$0 - \$12,060)	\$0	\$0	QHP + Extra	Included



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* Additional services for individuals in these categories: non-emergency transportation, non-prescription drugs, adult dental and vision care, orthotic services and orthopedic footwear



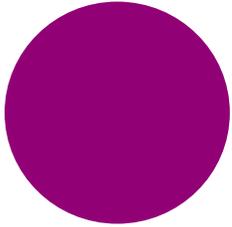
Health Care and Coverage Options for Undocumented Immigrants

Child Health Plus for children under 19

Medicaid for Pregnant Women

Medicaid for the treatment of an emergency medical condition

Hospitals and Community Health Centers



Qualified Health Plans

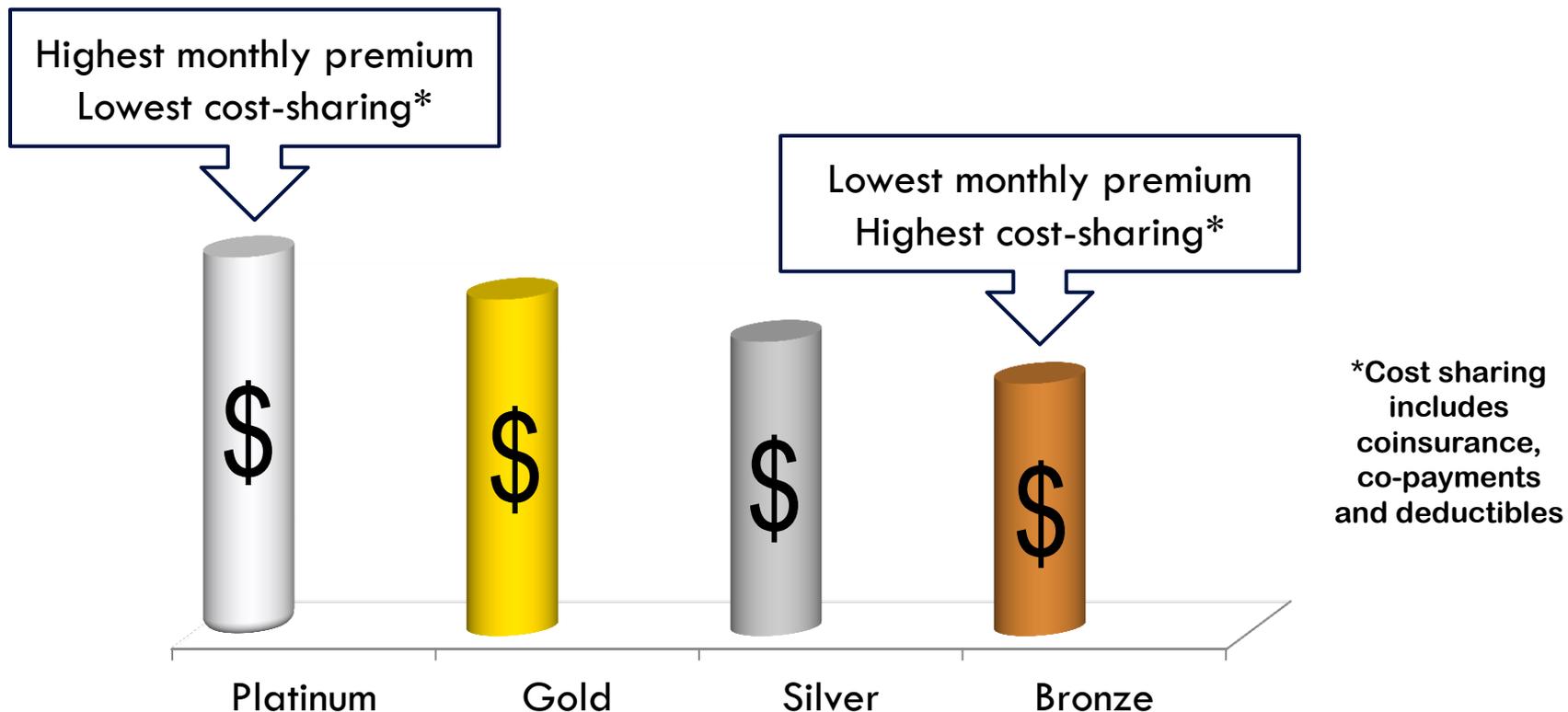
Covers the 10 essential benefits required by the Affordable Care Act

Qualified Health Plans may be bought directly through a private insurance company or through New York State of Health Marketplace

Consumers will only be eligible for financial help to pay for the cost of coverage if their plan is purchased through the Marketplace

There are multiple options for Marketplace plans, which vary based on provider network, prescription drug coverage and quality ratings

Health Plan “Metal Tiers”



In addition, insurers can offer a “catastrophic” plan with a higher deductible to those under age 30. All plans include all 10 health benefit categories, regardless of coverage tier.

Get Familiar with Health Insurance Terminology

Premium:

The cost you must pay each month toward your health plan.

Premium Tax Credits (PTC):

A tax credit that can help you afford the cost of your health plan only if it was purchased through the Marketplace.

Advanced Premium Tax Credits (APTC):

Tax credits that can be used right away to lower your monthly premium costs. If you qualify, you may choose how much advance credit payments to apply to your premiums each month, up to your maximum amount.

Get Familiar with Health Insurance Terminology

Cost-Sharing:

The out-of-pocket amount paid by the patient when receiving covered health services.

Depending on the plan, cost-sharing could include deductible, co-payments and coinsurance.

Co-payment:

A fixed price you pay at the time of receiving a covered health care service from a participating provider. The amount can vary by the type of covered health care service you are receiving.

Deductible:

The amount you must pay for health care services before your health plan begins to pay

Coinsurance:

The percentage of cost your health plan allows you to be charged for services after you've paid your deductible. Your health plan will cover the remaining portion of the cost.

Get Familiar with Health Insurance Terminology

Cost Sharing Reduction:

A discount that lowers the amount you have to pay out-of-pocket for deductibles, coinsurance, and copayments. You can get this reduction if you meet all of the following:

- you get health insurance through the Marketplace
- your income is below a certain level
- you choose a health plan from the Silver category.

Maximum Annual Out-of-Pocket:

The most you will pay out-of-pocket during a policy period (usually a year) before your health plan begins to pay 100% of the allowed amount for covered care.

Out-of-pocket expenses include the deductible, coinsurance and co-payments.

With tax credits, a Single Adult in the Manhattan will find a premium as low as...

Metal Tier	Annual Income					
	150% FPL	200% FPL	250% FPL	300% FPL	350% FPL	400% FPL
	\$17,820	\$23,760	* \$29,700	\$ 35,640	\$ 41,580	\$47,520
Essential Plan	\$0	\$20				
BRONZE			\$108	\$189	\$259	\$307
SILVER			\$153	\$233	\$304	\$352
GOLD			\$214	\$295	\$365	\$414
PLATINUM			\$292	\$373	\$443	\$492

Data on graphs and table are from the NY State of Health Tax Premium Estimator, accessed 10/26/2016, <http://info.nystateofhealth.ny.gov/calculator>. Actual prices may vary on Marketplace.

* Individuals earning above the Essential Plan maximum income eligibility level (\$23,760) and up to \$29,700 are eligible for additional subsidies to help pay for out-of-pocket expenses (deductibles, co-payments and co-insurance). However, they must enroll in a Silver Plan to get these subsidies.

Coverage and Financial Assistance for Eligible Individuals* Available Through NY State of Health

Hourly Wage	Weekly	Monthly	Yearly	Coverage
Former NYS minimum wage: \$9.00	\$315.00	\$1,364.99	\$16,380 (136% FPL)	Medicaid
\$10	\$350	\$1,516.66	\$18,200 (151% FPL)	Essential Plan, \$20/month
New NYS minimum wage: \$15	\$525	\$2,275.00	\$27,300 (226% FPL)	Private insurance, subsidy, cost sharing assistance
\$25	\$875	\$3791.66	\$45,500 (377% FPL)	Private insurance, small subsidy

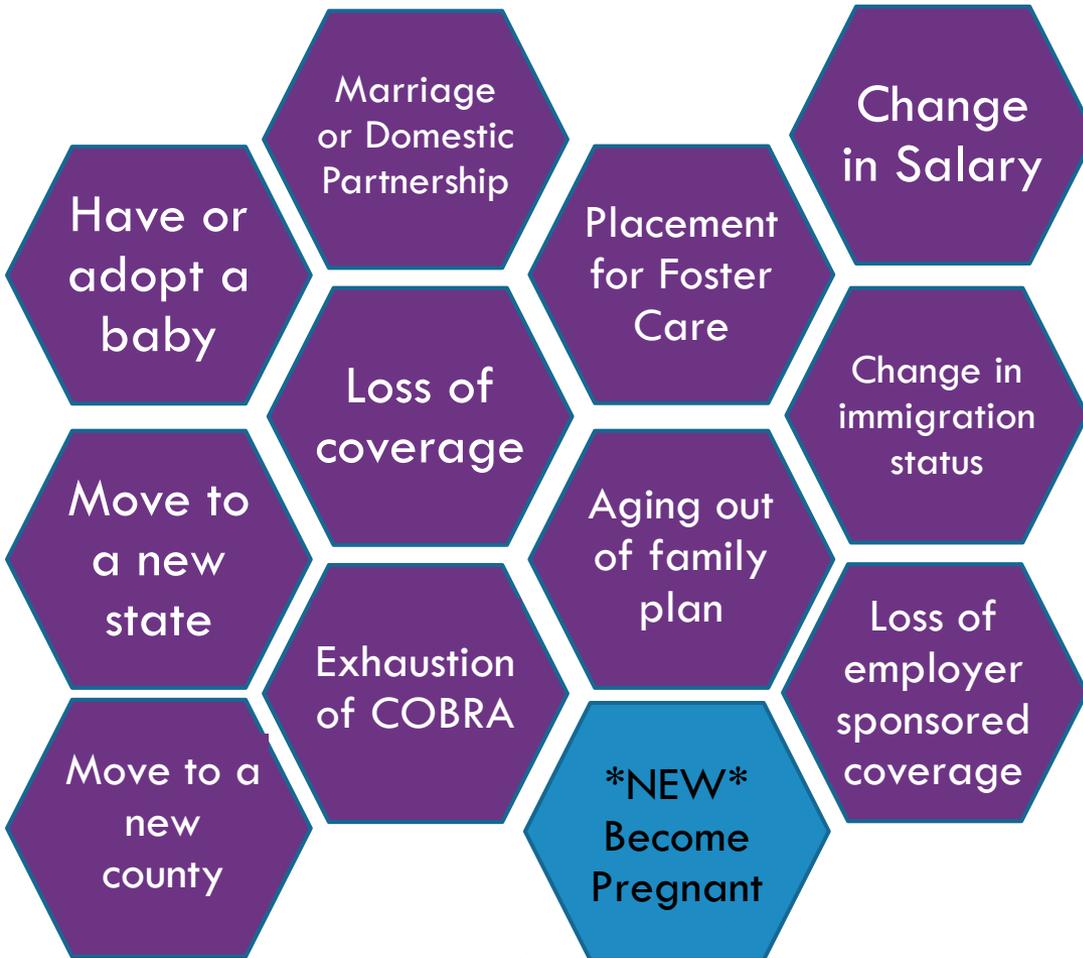
*for a Single Adult working 35 hours/week



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Notify the Marketplace if...



When your circumstances change your eligibility could be affected

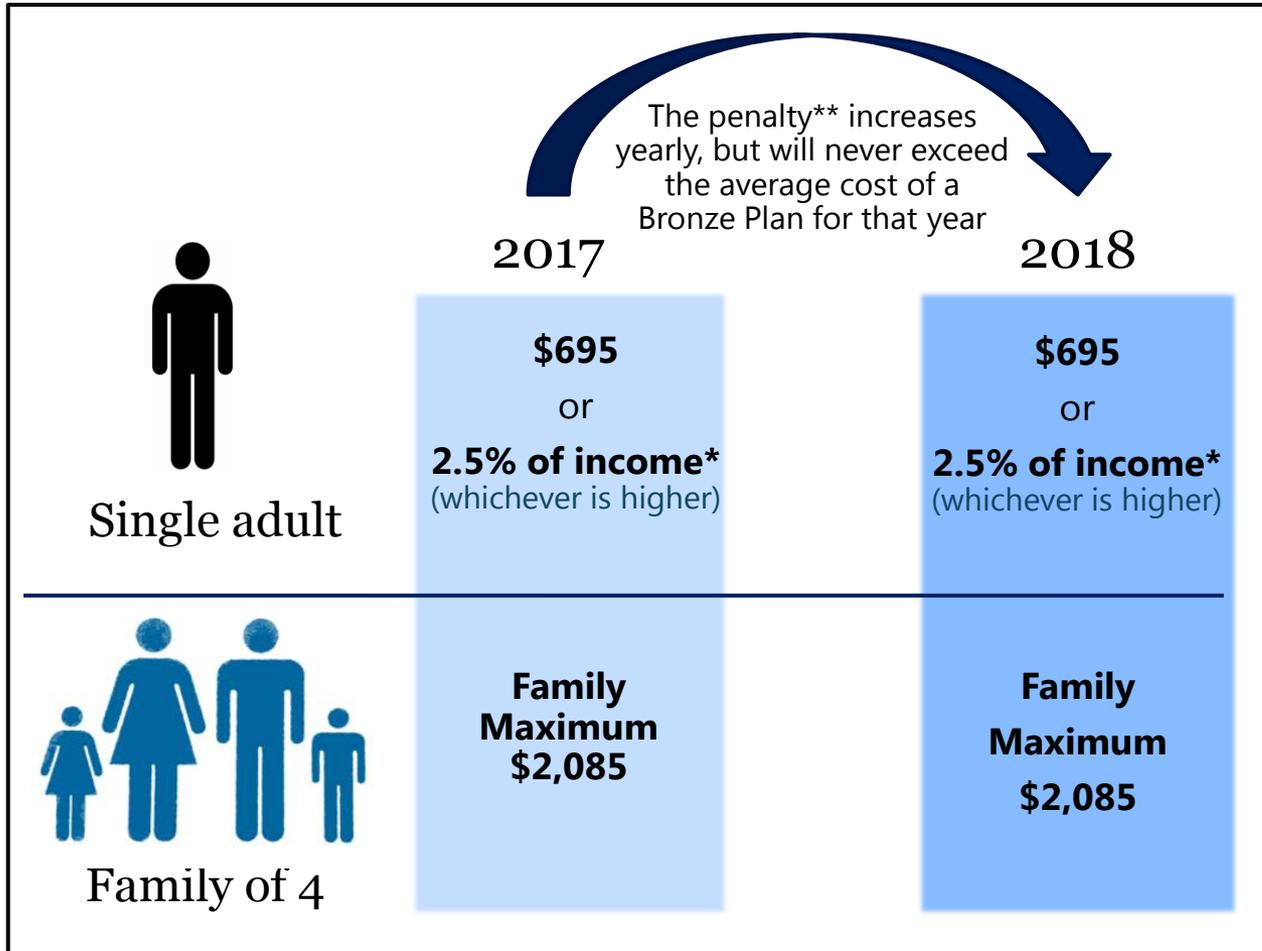
Life changes may also entitle you to a **Special Enrollment Period** where you can:

Newly enroll in Private Health Insurance

Change your health plan

You must notify the marketplace within **60 days** of the event

Uninsured individuals must pay a penalty to the IRS



Penalty is adjusted based on the number of months uninsured

*Income subject to penalty excludes income under the tax filing threshold (ex, \$10,350 for an individual for tax year 2016)

Some may not have to pay the penalty

Exemptions may be time limited

Individuals may apply for more than one exemption

You should apply via the Marketplace as soon as possible if you need an exemption

If your exemption is denied you have 90 days to appeal

E X E M P T I O N S

Uninsured less than 3 months

Earn too little to pay taxes

Cannot find affordable coverage

Have a hardship

Religious objection

Incarcerated

Reside outside of the US

Undocumented

American Indian or Alaskan Native

Apply at: <https://www.healthcare.gov/fees-exemptions/apply-for-exemption/>

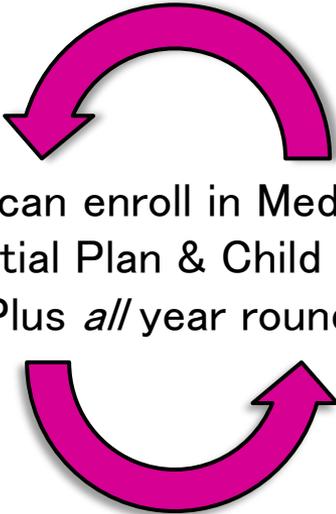


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Key Marketplace Dates

February 1, 2017 – October 31, 2017
Special Enrollment Period for
Private Insurance
 following a qualifying event



You can enroll in Medicaid,
 Essential Plan & Child Health
 Plus *all* year round!

Qualifying Events:

- Getting married
- Entering into a domestic partnership
- Getting pregnant or having a baby
- Changing immigration status
- Changing jobs
- Moving to New York or from county to county within New York
- Losing your health insurance coverage.



November 1, 2017 – December 15, 2017
Open Enrollment Period for private insurance

December 15, 2017
 Enroll by this date for coverage to
 begin January 1, 2018

December 16, 2017 – October 31, 2018
Special Enrollment Period for private insurance

***April 15, 2018**
 Penalty due to IRS for any month not insured in 2017
 if enforced by the IRS

* The penalty might be repealed next year.

References and Resources

NYC Health Insurance Link



Like us on Facebook

www.nyc.gov/hilink

Medicaid

www.nyc.gov/html/hra/html/directory/public_health.shtml

ACCESSNYC

www.nyc.gov/accessnyc

NY State of Health

www.nystateofhealth.ny.us

Kaiser Family Foundation

www.healthreform.kff.org

Healthcare.gov

www.healthcare.gov



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Contact the NY State of Health

If you have questions about health plans, financial assistance, or anything else about the NY State of Health please call the Customer Service Representative Help Line toll free at
1-855-355-5777; TTY: 800-662-1220

Customer Service hours of operation are:
Monday – Friday, 8 am – 8 pm
Saturday, 9 am – 1 pm

Shop, compare, purchase and enroll in public or private health insurance coverage at
www.nystateofhealth.ny.gov/



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Coverage options for individuals 65 years and older, living with a disability or visual impairment

Medicaid Eligibility

Eligibility requires information about:

- **Residency**

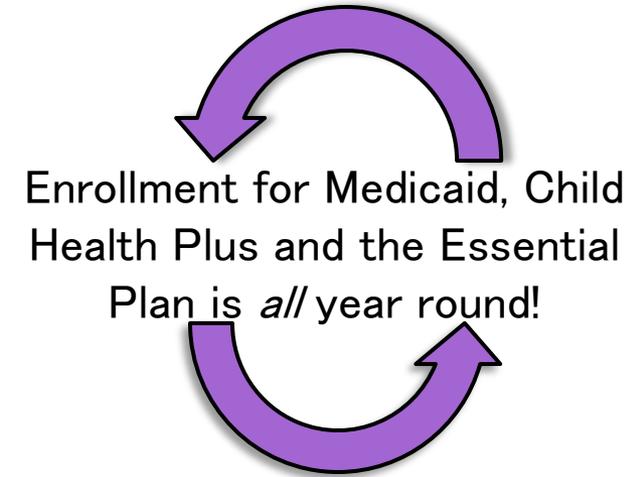
- Applicants must prove they reside in New York City
- No time requirement

- **Common documentation forms include**

- Rent receipt
- Lease
- Letter from Landlord/Person with whom you live
- Post dated marked mail – non-window envelope

- **Identity**

- US passport
- US passport card
- Naturalization certificate
- Certificate of citizenship
- Enhanced Driver/Non Drivers License
- Passport from foreign country
- Driver/Non Driver's License
- Photo id issued by an employer, school or government agency
- Legal Permanent Resident card (green card)



Medicaid Eligibility

Eligibility requires information about:

- **Income**

-  Single person: \$825/month; \$9,900/year

-  Couples: \$1,209/month; \$14,508/year

- **Resources:**

-  Single person: \$14,850

-  Couples: \$21,750

If you make more than these amounts you may qualify for Medicaid Excess Income Program or Medicaid Excess Resource Program to allow you to become eligible.

Medicaid Eligibility

- **Citizenship/Immigration status**

Must have appropriate immigration status

- **Qualified immigrants & persons lawfully residing in NY regardless of length of time in the country**
- **Immigrants Permanently Residing Under Color Of Law**
 - Immigrants who are eligible because they are in the U.S. with the knowledge and permission of USCIS.
 - Includes immigrants who are waiting for their interview with USCIS to become Lawful Permanent Residents.
- **Who is a NOT a qualified immigrant, lawfully residing, or PRUCOL?**

These individuals are not eligible:

 - Short term visa holders (for example, tourists - unless they have filed to stay on a permanent basis)
 - Undocumented immigrants

NOTE: Short term visa holders who are **residents** may qualify for coverage through the Marketplace

Applying for health insurance will not affect your immigration status!

Medicaid for the Treatment of an Emergency Medical Condition/“Emergency Medicaid”

Helps eligible, undocumented and temporary immigrant New Yorkers pay for medical costs when they have an emergency.

Do I qualify for Emergency Medicaid?

You may qualify for Emergency Medicaid if you:

- Are a New York State resident (temporary non-immigrants do not have to meet the state residency requirement).
- Are undocumented or a temporary non-immigrant.*
- Meet income eligibility requirements for full Medicaid, but don't qualify due to your immigration status.

How to apply

- You can sign up any time to be pre-approved in case you have a future emergency. If you enroll in advance, you will be approved for the costs of future emergencies as designated by a doctor for 12 months.
- Most people who are 65 or older, or who have a disability will need to complete a different application. **Consumers** can call [347-396-4705](tel:347-396-4705) for help to enroll. You can also sign up at a hospital during or after an emergency. You have to sign up within three months of the emergency treatment to be covered for the costs.



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Medicaid Excess Income Program

- Provides Medicaid coverage to certain individuals with income above the applicable Medicaid level
 - under age 21
 - age 65 or older
 - certified blind or certified disabled
 - pregnant or a parent of a child under age 21
- The amount individuals exceed the Medicaid income eligibility level is called “excess income,” “surplus” or the amount to be “spenddown”
- Eligible individuals can spenddown to the appropriate Medicaid level for their household size or provide medical bills (theirs or children/spouse) equal to or greater than the surplus amount



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Medicaid Buy-in for Working People with Disabilities

- Provides Medicaid coverage for **working individuals with disabilities** who may have income and resources above allowable limits for regular Medicaid

Eligibility

- Age: Between 16 – 64 years old
- Work: Employed and receiving wages/salary
- Disability: Certified disabled by the Social Security Administration, HRA, or State
- Income: \leq **250% FPL**
- Resources:

Single: \$2,513
Couple: \$3,384

Single: \$20,000
Couple: \$30,000



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Medicare Overview

- Federal public health insurance for individuals age 65 and older, some people with disabilities, and people with end-stage renal disease (ESRD)



Original Medicare (Public Plans)

Part **A**: Hospital Insurance

Part **B**: Medical Insurance

Part **D**: Prescription Drugs

Medicare Advantage (Private Plans)

Part **C**: Hospital, Medical, often Prescription and extras like vision and dental (hospice covered

through original Medicare)



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Medicare Eligibility

<https://www.medicare.gov/eligibilitypremiumcalc/>

- Individuals who are eligible to participate in these programs include **U.S. Citizens or Legal Permanent Residents living in U.S. continuously for five years** who are:
 - 65 and older
 - Receiving Social Security Disability (SSD) income for 24 months
 - **Exception:** people with Lou Gehrig's Disease (ALS) or End-Stage Renal Disease (ESRD) don't have to meet 24 month requirement

Note: Part A premiums are free for people if they or their spouse has ≥ 10 yrs work history (40 working quarters). Those without sufficient work history can buy-in if they have been lawful residents for five years.

Part A Premiums
up to \$413/month
in 2017

Medicare Eligibility

<https://www.medicare.gov/eligibilitypremiumcalc/>

- 2017 Medicare Part B Monthly Premium (based on income earned in 2015)
 - **\$134.00** with income up to \$85,000
 - **\$187.50** with income \$85,001 - \$107,000
 - **\$267.90** with income \$107,001 - \$160,000
 - **\$348.30** with income \$160,001 - \$214,000
 - **\$428.60** with income greater than \$214,000

Part B premium for
current enrollees is
\$109/month

Medicare Savings Program (MSP) Eligibility

Eligibility varies by Program

Qualified Medicare Beneficiary (QMB)

- **100% FPL**
Individual:
\$1,025/month
Couple:
\$1,374/month
- Resource test:
None if just QMB

Specified Low-Income Medicare Beneficiary (SLMB)

- **120% FPL**
Individual:
\$1,226/month
Couple:
1,644/month
- Resource test:
None if just SLMB

Qualified Individual 1 (QI-1)

- **135% FPL**
Individual:
\$1,377/month
Couple:
\$1,847/month
- No Resource test

Qualified Disabled and Working Individual (QDWI)

- **200% FPL**
Individual:
\$2,010/month
Couple:
\$2,7070/month
- Resource test:
\$4,000 ind.
\$6,000 couple



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Can also have Medicaid with QMB;
SLMB and QDWI

NYC Facilitated Enrollment for People 65 and Older, Living with Disabilities and Visually Impaired

Facilitated Enrollment Program for the Aged, Blind and Disabled

- Helping people enroll in Medicaid and Medicare Savings Programs through HRA
- 8 Department for the Aging Senior Center Sites in the Bronx, Brooklyn, Manhattan, Queens
- Coordinator: Lisbeth Pereyra

Email: pereyraguzmanl@hra.nyc.gov



References and Resources

- **Toll-free helplines for consumers:**

- New York City Health Insurance Information Counseling and Assistance Program (HIICAP): <http://www.nyc.gov/html/dfta/html/benefits/health.shtml>, **311**
Free, current and impartial information on health care coverage for people with Medicare, those soon-to-be eligible for Medicare, and their representatives
- Independent Consumer Advocacy Network (ICAN): <http://www.icannys.org/>, **844-614-8800**
Consumer helpline for people enrolled in Managed Long-Term Care (MLTC) Plans, people who want to enroll in a MLTC Plan, or family/friends/representatives
- Community Health Advocates (CHA): <http://www.communityhealthadvocates.org/>, **888-614-5400**
Consumer helpline to help New Yorkers understand their health insurance and access health services
- NYC Human Resources Administration Medicaid Helpline: **888-692-6166**
- 1-800-MEDICAR(E): <http://www.medicare.gov>, **800-633-4227**
Consumer helpline for questions about Medicare coverage, claims, or how Medicare works with other insurance plans.
- Social Security Hotline: **800-772-1213**
Consumer helpline for Medicare eligibility and enrollment information, lost Medicare card replacement, and general Social Security issues.



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NYC Facilitated Enrollment for People 65 and Older, Living with Disabilities and Visually Impaired

Facilitated Enrollment Program for the Aged, Blind and Disabled

- Helping people enroll in Medicaid and Medicare Savings Programs through HRA
- Department for the Aging Senior Center Sites and Department of Health and Mental Hygiene Health Centers in the Bronx, Brooklyn, Manhattan, Queens
- Coordinator: Lisbeth Pereyra

Email: pereyraguzmanl@hra.nyc.gov



Contact OCHIA for Health Insurance Workshops

- Presentations on Health Care and Coverage Options for People 65 years and older, Living with a Disability, and Visually Impaired
 - Contact Lisbeth Pereyra at pereyraguzmanl@hra.nyc.gov
- Presentations focused on options for young adults
- Staff Training on Public and Private Health Insurance
- Presentations for Small Employers (2-50 employees)
 - All other trainings: Contact Audrey M. Diop at diopa@hra.nyc.gov



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